

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)  
1000337

Type or print in Ink.

CITY CLERK

2013 FEB 22 PM 12:48

COVER PAGE

CALIFORNIA  
FORM **460**

Page 1 of 7

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

<b>Statement covers period</b>	<b>Date of election if applicable:</b> (Month, Day, Year)
from <u>01/04/2013</u>	
through <u>02/16/2013</u>	<u>04/02/2013</u>

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee      | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>  |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Preelection Statement<br><input type="checkbox"/> Semi-annual Statement<br><input type="checkbox"/> Termination Statement<br>(Also file a Form 410 Termination)<br><input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement<br><input type="checkbox"/> Special Odd-Year Report<br><input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
|---|---|

**3. Committee Information**

I.D. NUMBER  
1355010

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Sam Engel For Glendale City Council 2013

STREET ADDRESS (NO P.O. BOX)

1431 Irving Avenue

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Glendale	CA	91201	(818) 497-8842

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

samengel4citycouncil@gmail.com

**Treasurer(s)**

NAME OF TREASURER

Samuel Engel, Jr.

MAILING ADDRESS

1431 Irving Avenue

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Glendale	CA	91201	(818) 497-8842

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

samengeljr@charter.net

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 02/21/2013  
Date

Executed on 02/21/2013  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By Samuel Engel  
Signature of Treasurer or Assistant Treasurer

By Samuel Engel  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee  
Campaign Statement  
Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

Page 2 of 7

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Samuel Engel, Jr.

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
1431 Irving Avenue	Glendale	CA	91201

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Type or print in Ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/04/2013	
through	02/16/2013	Page 3 of 7
NAME OF FILER Sam Engel For Glendale City Council 2013		I.D. NUMBER 1355010

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

## Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3	\$ 1,685.00	\$ 1,685.00
2. Loans Received .....	Schedule B, Line 3	5,000.00	5,000.00
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2	\$ 6,685.00	\$ 6,685.00
4. Nonmonetary Contributions .....	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4	\$ 6,685.00	\$ 6,685.00

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$	\$
21. Expenditures Made	\$	\$

## Expenditures Made

6. Payments Made .....	Schedule E, Line 4	\$ 6,400.80	\$ 6,400.80
7. Loans Made .....	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7	\$ 6,400.80	\$ 6,400.80
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment .....	Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10	\$ 6,400.80	\$ 6,400.80

## Expenditure Limit Summary for State Candidates

<b>22. Cumulative Expenditures Made*</b> (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
/ /	\$
/ /	\$

## Current Cash Statement

12. Beginning Cash Balance .....	Previous Summary Page, Line 16	\$ 0.00
13. Cash Receipts .....	Column A, Line 3 above	6,685.00
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4	0.00
15. Cash Payments .....	Column A, Line 8 above	6,400.80
16. ENDING CASH BALANCE .....	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 284.20

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED .....	Schedule B, Part 2	\$ 0.00
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## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .....	See instructions on reverse	\$ 0.00
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above	\$ 5,000.00

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



# Schedule A Monetary Contributions Received

Type or print in Ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>01/04/2013</u> through <u>02/16/2013</u>		<b>CALIFORNIA FORM 460</b>
Page <u>4</u> of <u>7</u>		
NAME OF FILER Sam Engel For Glendale City Council 2013		I.D. NUMBER 1355010

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/20/2013	Mr. David Engel 1020 E. Harvard Burbank, CA 91501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Classroom Instructor Burbank Unified School District	100.00	100.00	
01/20/2013	Sandra Engel 1020 E. Harvard Burbank, CA 91501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Burbank Unified School District	100.00	100.00	
01/29/2013	Mr. Samuel Engel Sr. 1521 E. Alameda Glendale, CA 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired none	1,000.00	1,000.00	
02/04/2013	Billy Bennett 1616 Virginia Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	200.00	200.00	
02/04/2013	Wilbur Gin 508 Floral Park Terrace South Pasadena, CA 91030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer Self (Ashton Edwards & Gin)	100.00	100.00	
<b>SUBTOTAL \$</b>				1,500.00		

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 1,600.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 85.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 1,685.00

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Type or print in Ink.  
 Amounts may be rounded  
 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/04/2013	
through	02/16/2013	Page <u>5</u> of <u>7</u>
NAME OF FILER Sam Engel For Glendale City Council 2013		I.D. NUMBER 1355010

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/04/2013	Mrs. Paulette Wood 1201 Moncado Glendale, CA 91207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	100.00	100.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				100.00		

**\*Contributor Codes**

IND - Individual  
 COM - Recipient Committee  
 (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

FPPC Form 460 (January/05)  
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# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/04/2013	
through	02/16/2013	Page <u>6</u> of <u>7</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

I.D. NUMBER

1355010

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Mr. Sam Engel Jr. 1431 Irving Avenue Glendale, CA 91201	Resource Specialist City of Glendale	\$ 0.00	\$ 5,000.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 5,000.00 04/22/2013 DATE DUE	0% RATE \$ 0.00	\$ 5,000.00 01/17/2013 DATE INCURRED	CALENDAR YEAR \$ 5,000.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
<b>SUBTOTALS \$</b>		5,000.00\$	0.00\$	5,000.00\$	0.00			

## Schedule B Summary

(Enter (e) on  
Schedule E, Line 3)

- Loans received this period ..... \$ 5,000.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 5,000.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



# Schedule E Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/04/2013	through 02/16/2013	
Page 7 of 7		I.D. NUMBER 1355010

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<b>CMP</b> campaign paraphernalia/misc.	<b>MBR</b> member communications	<b>RAD</b> radio airtime and production costs
<b>CNS</b> campaign consultants	<b>MTG</b> meetings and appearances	<b>RFD</b> returned contributions
<b>CTB</b> contribution (explain nonmonetary)*	<b>OFC</b> office expenses	<b>SAL</b> campaign workers' salaries
<b>CVC</b> civic donations	<b>PET</b> petition circulating	<b>TEL</b> t.v. or cable airtime and production costs
<b>FIL</b> candidate filing/ballot fees	<b>PHO</b> phone banks	<b>TRC</b> candidate travel, lodging, and meals
<b>FND</b> fundraising events	<b>POL</b> polling and survey research	<b>TRS</b> staff/spouse travel, lodging, and meals
<b>IND</b> independent expenditure supporting/opposing others (explain)*	<b>POS</b> postage, delivery and messenger services	<b>TSF</b> transfer between committees of the same candidate/sponsor
<b>LEG</b> legal defense	<b>PRO</b> professional services (legal, accounting)	<b>VOT</b> voter registration
<b>LIT</b> campaign literature and mailings	<b>PRT</b> print ads	<b>WEB</b> information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Liberty Campaign Solutions, LLC P.o. Box 631 Torrance, CA 90508	CMP		4,525.80
Liberty Campaign Solutions, LLC P.o. Box 631 Torrance, CA 90508	CNS		1,000.00
City of Glendale 513 E. Broadway Glendale, CA 91206	FIL		825.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 6,350.80

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 6,350.80
2. Unitemized payments made this period of under \$100	\$ 50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$</b> 6,400.80

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

## Sam Engel

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**From:** no-reply@netfile.com  
**Sent:** Thursday, February 21, 2013 4:12 PM  
**To:** samengeljr@charter.net  
**Subject:** Successful e-filing -- Filing ID# 140286703

Hi,

On 02/21/2013 at 4:11:41 PM, an e-filing was submitted to the NetFile system on the behalf of filer 'Sam Engel For Glendale City Council 2013 (GLD-112413)' (filer id# GLD-112413). The filing was successful. Your confirmation for this e-filing is:

CAMPAIGN\_201\_FPPEC460

Filing ID# 140286703

Period 01/04/2013 through 02/16/2013

If you need assistance, please contact NetFile technical support staff at [filerhelp@netfile.com](mailto:filerhelp@netfile.com).

Sincerely,

NetFile Technical Support

### VALIDATION RESULTS:

Line 2 :Warning: 301 A statement filed by a candidate must include the candidate's office information

Errors : 0  
Warnings : 1  
Info : 0

PASSED VALIDATION

[Submission id #0]